

CALIFORNIA HOMŒOPATH.

A BI-MONTHLY JOURNAL, DEVOTED TO THE INTERESTS
OF HOMŒOPATHY ON THE PACIFIC COAST.



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WM. BOERICKE, M. D.

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HOMŒOPATHY IN CALIFORNIA.

By C. W. BREYFOGLE, M. D., SAN JOSÉ.

The length of time that has elapsed since Homœopathy was first introduced in California, and the progress this system of medicine has made, would at first thought lead us to suppose that the hard pioneer work was over, and that we, practitioners of the later days, could follow the example of many of our Eastern brethren, and quietly appropriate the laurels. This is not true! We acknowledge that the new system of medicine is, in the main, well introduced, and that its many Eastern patrons, constantly settling here, give it almost, if not quite, an Eastern basis. We acknowledge to a growing tide of popularity which has already made itself felt all over the coast, and which keeps full pace with our Eastern friends. With all this we have no fault to find; only praise and blessings to those who have given us "the Science of Therapeutics," and helped its elucidation. Yet we claim that there is great pioneer work to do, and that *now* is the time to begin. There is not a practitioner on this coast but regrets the isolation to which he is subject. Our grand old American Institute, with its *morale* and its fraternization, is way beyond our reach. Our territory is so large that a general State society necessitates as much sacrifice of time, patients, and expense, as a meeting of the Western Academy of Medicine, or even more. Of colleges we have none, and hence we lose not only the teaching, but what is of far more value, we lose the *centralization* which it would give. Nor have we even a journal, by which we can make known our wants, ask fraternal counsel, help, and sympathy; discuss plans for professional rectitude, fraternization, and progress. Not one rallying point except the State Society, meeting once a year, and even then only of use to those who can spare the time to attend. The result of all this is, that the interests of the profession are so scattered that the progression which we might so easily make is retarded, or is half-way gained by the efforts of a few faithful ones. Naturally, too, a still worse situation obtains. Individualization (the key to successful practice) should be unheard of *as a school of practitioners*. The interests of one *should* be the interests of all. We should be a fraternal brotherhood, laboring for a special purpose, each individual work and each individual success taking its proper place as a perfect stone in the one grand superstructure. If not, one interest is bound to clash with another, and struggle and professional antagonisms surely result. The great want of Homœopathy in California to-day is a fraternal unanimity of work and feeling. With

proper endeavor, there is no reason why this should not be obtained. It is the key to the future.

How can we obtain it? All honor to this the proper first effort! You say your journal shall be a means of communication between physicians, and between the profession and its intelligent patrons. Make it so. Let its monthly or bi-monthly coming be looked and longed for all over the coast. Let our brother in San Diego send his greeting to Portland, and let us counsel together, get acquainted with each other, and let this monthly visitor be the shekinah to us in professional light, the three links in professional fraternity, the center at which we can unite for systematic work. To do so requires general response. Let no one wait. The physician who lives in the remotest corner, laboring day after day in his weary routine of work, without counsel, with a feeling that he is alone in his efforts to build up Homœopathy, will have his work lightened by its very presence. While all take our splendid Eastern journals and glean much of instruction and pleasure from their pages, yet do we want our own—ours individually—ours to command and be proud of. *Here it is, Brother!* We in San José send you greeting. We are gaining, growing all the time, here. Our system is respectable now, and we mean to keep it so. How is it with you? Let us hold up the hands of Brothers Boericke & Schreck, and make this journal one which we shall be proud to send to our brethren East as a token of our work. Then we shall soon be ready for larger meetings of our State Society, for claims upon our charitable and literary institutions, and for a college where our students can be educated. *We can all do something, and we will.*

THE DEVELOPMENT OF HOMŒOPATHY.

By WM. BOERICKE, M. D.

For the promulgation of every great truth, such an one as produces an epoch in the history of thought or in the establishment of a science, one that contains within itself in potentiality, unlimited power to enlarge the intellectual horizon of mankind, a human instrument is provided, whose preparation for the work when viewed *a posteriori* seems eminently perfect in its adaptation to the work to be performed. It must have been so with every great man—it was so with Hahnemann in his relation to his special mission. And we can learn a valuable lesson for our own guidance in continuing his works by studying the method of his preparation for it, and his mode of its pursuit. It is needless to go into the particulars of his biography. Born amidst circumstances where the struggle for existence left no room for idle or debilitating pursuits, he early acquired those habits of industry, thoroughness, and perseverance that laid so broad a foundation for his future mental growth. Similar healthy influences were at work for his moral nature, and it was due to the influence of his home, though humble in worldly things, yet rich in its affection and care for the nurture of its inmates, that he was always surrounded by an atmosphere of love of good, useful work, of sincerity, love of truth and of humble, simple, religious life. These became traits of his character; they shine out strongly in his mature life; they were always part of his being, growing with his growth. At the university his studious habits and bright and intelligent pursuit of his studies attracted the attention of Prof. Quarin, then a medical celebrity, and through

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his influence received the flattering appointment of physician to Baron Brückenthal, offering him an opportunity to put his studies to a practical test, and giving him ample time to devote himself to further study and experiment. Here and subsequently in his native country, he practiced his profession, and gained the respect and gratitude of his patients and fellow practitioners. His intellectual and scientific attainments placed him in the front rank of physicians of his time. His devotion to science, sincere love of truth, untiring earnestness in its pursuit brought their reward, and he enjoyed the friendship of some of the greatest men of his time and had held out to him brilliant prospects. But the same spirit of truth, the same loyalty to it showed him the inefficiency, aye, the utter lack of certainty and of prevision, hence the entire unscientific character of the practice of medicine.

The accumulated store of medical tradition for ages offered him nothing satisfactory; it consisted almost wholly of theories embodying vagaries ever new and changing. A man of such delicate mental organization as was Hahnemann's, when called upon to do the duties of a physician, whose only duty, as he himself says in the opening paragraph of his *Organon*, is to heal the sick, must have suffered greatly to find himself powerless to conquer disease, in spite of his knowledge of the sciences, his learning, and thorough acquaintance with the "authorities."

It was a great gain and a promising hope that these same authorities did not enthrall him, as they did his predecessors and contemporaries; but when he was convinced that the fault lay not in him, but was the imperfection and poverty of his art, we find him giving up, with characteristic courage, regardless of personal consequences, the practice of medicine that promised such brilliant advancement for him. He fell back upon his chemical studies, in which field he had done much valuable and original work, and these, together with translations from different languages, gave him sufficient to maintain his family, albeit in a very meagre way. But it needed more than this negative self-denial. That was but the first inevitable step in his personal preparation for the grand work he was to achieve. He was to realize more fully the utter helplessness of the then existing school of medicine, by bringing the results of its inadequacy nearer home! His own family, suffering with disease, called out for help. It would not answer now merely to declare his inability to give succor. He could not quiet the conscience of the father by renouncing the practice of his profession. His was the more active work of self-denial now. For is it possible that such a man with such a mind, such loyalty to truth, such persevering zeal, is going to rest and see his own kindred taken from him, because he had no means on which he could rely for their relief? Would he not exercise every faculty, and strain all his powers to bring aid, endeavoring to place his profession on a surer basis? Would not the very humiliation that was entailed in this acknowledgment of his powerlessness, lead him to the light? For all true light can only be received through such a humiliation of ourselves that will lead to an entire giving up of all our preconceived notions, and thus to look beyond. These form the mental barriers to our growth and progress, and humility and distrust in ourselves are alone effectual in their removal.

His own account of his state of mind at that time speaks for itself: "Well, said I to myself, since there must be a sure and certain method of cure, as there is a God, the wisest and best of beings, I will quit the barren field of ontological explanations; I will listen no longer to arbitrary opinions, with whatever art they may be reduced into systems; I will no longer bow before celebrated names, but I will seek near at hand, where it ought to be found, this method, of which no one has thought, because it was too simple, because it did not appear sufficiently learned, because it was not surrounded with crowns for the masters in the art of constructing hypotheses and scholastic abstractions."

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All of us are willing enough to accept truths that do not disturb our comfortable grooves, our means of subsistence, our ways of life; but sapling truths, that first must be iconoclastic, in order to build anew in true order, most of us dislike, and shut ourselves against. Then, too, the disciple needs a spirit akin to the master to have courage to adopt truths that run counter to the general acceptance of mankind. And so we need not wonder that Hahnemann's suggestions were ignored—and it was well so. For this lack of appreciation was a necessary factor for the final birth of Homœopathy. It led to ten years' further study, to a systematic arrangement of its doctrines, and their embodiment in the "*Organon*," that high-water mark of medical philosophy. See what the appearance of this work meant. Not the hasty opinions superficially expressed by an ordinary mind, but the deductions according to strictly scientific methods from labors and observations of twenty years by a mind exceptionally gifted as it was exquisitely trained for such a work. Now appears for the first time the word Homœopathy. Hitherto he had spoken of his method only as "specific." But now, in 1805, having perfected his system and demonstrated its truth, he appears in the "*Organon*" as the Moses of medicine, promulgating the law—the law of Homoion—which he formulated *similia similibus curantur*—and the system of practice based upon that law—Homœopathy.

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HOMOEOPATHY IN CATARRH.

By MAX. WERDER, M.D.

In treating of this affection it is not my purpose to speak at length of its acute form, but rather more specially call attention to the chronic form of this disease.

In the acute form—common cold—or where accompanied with fever—catarrhal fever—we have an affection which consists in a mild degree of inflammation of the lining membranes of the nostrils, larynx, or bronchi, or all, and occasionally of the ramifications of the latter. According to location of the irritation and inflammation, it may be called, then, nasal laryngeal, or bronchial catarrh. As *per causa*, it may be induced by sudden changes of temperature, or by damp, chilly atmosphere, low, damp dwellings, frequent thorough wetting, or insufficient clothing, as is often the case in children.

This complaint is generally characterized by slight fever, impaired appetite, *unusual* languor, obstruction of the nose, sneezing, pain in the head, back and extremities, soreness of the whole body, "sore all over," as the patient will express it; subsequently, hoarseness and cough, generally preceded by transitory chills and shiverings, followed by fever, more or less. Should the larynx and bronchi be mostly involved, there may be wheezing and difficulty of breathing, etc.

In the above outlined picture we have the acute form of *catarrh*, and have yet easy access to its speedy removal by the following homoeopathic remedies, when timely and judiciously given according to their respective indications as the symptoms present: Aconite, Quillaya, Ammon. carb., Arsenic, Bryonia, Kal. bich., Sticta, Caustic. We will not only relieve the patient, but will prevent the disease from running into the various chronic forms of *catarrh*, which so often baffle the physician's skill, and annoy the patient for years. When we consider that catarrh has been, and is now, a very general complaint in California, or on this coast, it seems to us all the more needful to consider the various chronic forms of catarrh in the light of homoeopathic therapeutics. Physicians often will meet cases that have been neglected for years; or not only so, but cases that have been treated by all possible external applications, as washes, douches, sprays, and inhalations. Medicated inhalation by spray has been one of the most popular modes of late.

Yet, in spite of all the various apparatus invented and issued for the local application of remedies by inhalation, they have failed, in *most chronic cases*, to give more than temporary relief. Still, temporary relief is better than none; yet it is left for *Homoeopathy* to do more—to effect, even in the most chronic cases, a permanent cure, when all else has failed!

There are certainly some useful agents that may be employed as local applications, like Eucalyptus, Sanguinaria, Sticta, Jodi tinct., etc., but not without the internal similimum of the indicated Homoeopathic remedy. The latter is the most important, and the most needed to effect a cure. The inhaling of the Eucalyptus fumes, and of the Sanguin. have materially modified some cases of catarrh in children, and also in adults, especially such that follow malaria or intermittent fevers; yet the most skillful application in a wash or inhalation, is not, and never will be equal to the proper internal treatment according to the law of *similia*. Again, catarrh, in itself, is not a dangerous or fatal disease, yet the continued chronic form in scrofulous or consumptive families, especially in children, may lay the seed to consumption, as it were; it may run into ozœna, laryngitis, bronchitis, and laryngo-bronchial consumption. It is, therefore, highly important that a catarrh in children should not be neglected, in whatever form it may appear. When local treatment does no good, as it usually fails, give the proper internal treatment until a happy result follows. It will take time in a chronic case, yet it will hardly take as long a time as is generally wasted by experimenting in the old *modus operandi*, where, in spite of what they do, the discharges go on, and the disease continues. In many cases I have met, years were fooled away, and no cure was effected.

TREATMENT.

General Catarrh, when chronic, must be treated constitutionally, and, as we have often verified this truth in *Homoeopathic* treatment. Here as well as in other diseases the law of *similia similibus* stands true! In connection herewith let me

relate one case which was considered almost a hopeless one. A young lady, æt. 22, a professional singer, contracted catarrh; had it four years when she consulted me. The whole mucous passages of the head were involved. The nose, the nasal sinuses, the eustachian tubes, the mouth and larynx. She was treated for several years, off and on, with all the different inhaling paraphernalias known to the old school, without any beneficial result. All these years the patient could not use her voice, as the vocal organs were seriously implicated with the rest. She has since been cured in *one year and a half* by Homoeopathic treatment with internal remedies only. She has recovered her voice and is able to sing again. Many other cases could be cited of a similar nature, if space would permit. We, however, shall be short in remarks by only giving an additional list of remedies *we use* in chronic catarrh and their indications as to symptoms and characteristics.

Acute form "common cold."

Aconite.—Chilliness, fever, inflammatory synochial fevers, anxiety, pains all over, very restless and thinks he must die.

Amon. c.—Cold commences in the head, nose runs water, is apt to go down in the throat, sneezes a great deal, headache, and burning in the nose.

Arsenic.—Watery discharge from the nose, sudden cold, feels chilly from the least exposure, *pulse feels weak* especially in the extremities; no appetite, *worse in evening*.

Bryonia—May follow *Aconite* or be given in preference at the commencement of the cold, when there is an excessively dry, hollow cough accompanied with tenderness of the larynx on pressure, inclination to vomit, must keep quiet; *worse from any motion*, is sore all over, violent coryza, thirst, etc.

Dulcamara.—Dull, passive pain in the head, humming in the ears; got cold from *damp, chilly atmosphere, damp church, room or dwelling*; catarrhal fever, with hoarseness; dry, rough cough; burning of the skin; may have a fine rash, etc., etc.

Kali Bichr.—This is one of our most important remedies in acute as well as in the chronic form of catarrh. Discharges of a great deal of mucus from the nose; like hay fever, yellow, bad smelling coryza; in the chronic form, accumulation of secretion in the inferior nares, especially at night, when it drops down the throat, waking the patient up coughing and choking. This remedy must be used for weeks, and even months, at intervals, in the chronic form. The 3d, 4th or 6th trit (1x10) is the best; three to four times a day.

Eucalyptus Glob.—This is one of the foremost and most useful agents in chronic catarrh. It has been, and I think, still is, rather neglected as such by many physicians. Since there is no proving of it, its indications are clinical only. Still, the manifest favorable clinical results we repeatedly had with it give it a good name and a prominent place in this particular disease. It has to be used persistently for months—and repeated between intervals—if there should be another remedy indicated for the time being. We must never lose sight of it in a chronic case. We use mostly the 2d and 3d dilution internally, and in some cases the tincture locally at the same time. Dose, from three to four or five times a day, 10 drops in half a glass of water, of which solution a tablespoonful is to be taken.

Symptoms.—Profuse discharge from the nose, mostly watery or milky discharges, soreness of the nose, irritative heat through the nasal passages and throat; takes cold very easily (like sulph.); great languor and weakness in the morning, heat and restlessness at night; *talks through the nose*. These symptoms have been verified in clinical cases. It seems to be more adapted for chronic and nasal catarrh than any other form.

Causticum.—Coryza with hoarseness; the catarrh is more generally in the throat and larynx, accompanied with difficulty in speaking (*catarrhal aphonia*), especially in singers, and pale, yellow-faced clerks.

Hoarseness is always present when *causticum* is indicated. The patient has a yellow complexion, is melancholy, and looks at the dark side of everything.

Carbo Veg.—This is another very important remedy in catarrhal aphonia—great hoarseness and changeable voice. We cured with it a lady, middle-aged, that could not talk over a whisper for two years. Given at intervals for two months; used first the 3d trit; subsequently, the 2d.

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In the acute form—common cold—or where accompanied with fever—catarrhal fever—we have an affection which consists in a mild degree of inflammation of the lining membranes of the nostrils, larynx, or bronchi, or all, and occasionally of the ramifications of the latter. According to location of the irritation and inflammation, it may be called, then, nasal laryngeal, or bronchial catarrh. As *per causa*, it may be induced by sudden changes of temperature, or by damp, chilly atmosphere, low, damp dwellings, frequent thorough wetting, or insufficient clothing, as is often the case in children.

This complaint is generally characterized by slight fever, impaired appetite, *unusual* languor, obstruction of the nose, sneezing, pain in the head, back and extremities, soreness of the whole body, "sore all over," as the patient will express it; subsequently, hoarseness and cough, generally preceded by transitory chills and shiverings, followed by fever, more or less. Should the larynx and bronchi be mostly involved, there may be wheezing and difficulty of breathing, etc.

In the above outlined picture we have the acute form of *catarrh*, and have yet easy access to its speedy removal by the following homoeopathic remedies, when timely and judiciously given according to their respective indications as the symptoms present: Aconite, Quillaya, Ammon. carb., Arsenic, Bryonia, Kal. bich., Sticta, Caustic. We will not only relieve the patient, but will prevent the disease from running into the various chronic forms of *catarrh*, which so often baffle the physician's skill, and annoy the patient for years. When we consider that catarrh has been, and is now, a very general complaint in California, or on this coast, it seems to us all the more needful to consider the various chronic forms of catarrh in the light of homoeopathic therapeutics. Physicians often will meet cases that have been neglected for years; or not only so, but cases that have been treated by all possible external applications, as washes, douches, sprays, and inhalations. Medicated inhalation by spray has been one of the most popular modes of late.

Yet, in spite of all the various apparatus invented and issued for the local application of remedies by inhalation, they have failed, in *most chronic cases*, to give more than temporary relief. Still, temporary relief is better than none; yet it is left for *Homoeopathy* to do more—to effect, even in the most chronic cases, a permanent cure, when all else has failed!

There are certainly some useful agents that may be employed as local applications, like Eucalyptus, Sanguinaria, Sticta, Jodi tinct., etc., but not without the internal similitum of the indicated Homoeopathic remedy. The latter is the most important, and the most needed to effect a cure. The inhaling of the Eucalyptus fumes, and of the Sanguin. have materially modified some cases of catarrh in children, and also in adults, especially such that follow malaria or intermittent fevers; yet the most skillful application in a wash or inhalation, is not, and never will be equal to the proper internal treatment according to the law of *similia*. Again, catarrh, in itself, is not a dangerous or fatal disease, yet the continued chronic form in scrofulous or consumptive families, especially in children, may lay the seed to consumption, as it were; it may run into ozæna, laryngitis, bronchitis, and laryngo-bronchial consumption. It is, therefore, highly important that a catarrh in children should not be neglected, in whatever form it may appear. When local treatment does no good, as it usually fails, give the proper internal treatment until a happy result follows. It will take time in a chronic case, yet it will hardly take as long a time as is generally wasted by experimenting in the old *modus operandi*, where, in spite of what they do, the discharges go on, and the disease continues. In many cases I have met, years were fooled away, and no cure was effected.

TREATMENT.

General Catarrh, when chronic, must be treated constitutionally, and, as we have often verified this truth in *Homoeopathic* treatment. Here as well as in other diseases the law of *similia similibus* stands true! In connection herewith let me

relate one case which was considered almost a hopeless one. A young lady, æt. 22, a professional singer, contracted catarrh; had it four years when she consulted me. The whole mucous passages of the head were involved. The nose, the nasal sinuses, the eustachian tubes, the mouth and larynx. She was treated for several years, off and on, with all the different inhaling paraphernalias known to the old school, without any beneficial result. All these years the patient could not use her voice, as the vocal organs were seriously implicated with the rest. She has since been cured in *one year and a half* by Homoeopathic treatment with internal remedies only. She has recovered her voice and is able to sing again. Many other cases could be cited of a similar nature, if space would permit. We, however, shall be short in remarks by only giving an additional list of remedies *we use* in chronic catarrh and their indications as to symptoms and characteristics.

Acute form "common cold."

Aconite.—Chilliness, fever, inflammatory synochial fevers, anxiety, pains all over, very restless and thinks he must die.

Amon. c.—Cold commences in the head, nose runs water, is apt to go down in the throat, sneezes a great deal, headache, and burning in the nose.

Arsenic.—Watery discharge from the nose, sudden cold, feels chilly from the least exposure, *pulse feels weak* especially in the extremities; no appetite, *worse in evening*.

Bryonia—May follow *Aconite* or be given in preference at the commencement of the cold, when there is an excessively dry, hollow cough accompanied with tenderness of the larynx on pressure, inclination to vomit, must keep quiet; *worse from any motion*, is sore all over, violent coryza, thirst, etc.

Dulcamara.—Dull, passive pain in the head, humming in the ears; got cold from *damp, chilly atmosphere, damp church, room or dwelling*; catarrhal fever, with hoarseness; dry, rough cough; burning of the skin; may have a fine rash, etc., etc.

Kali Bichr.—This is one of our most important remedies in acute as well as in the chronic form of catarrh. Discharges of a great deal of mucus from the nose; like hay fever, yellow, bad smelling coryza; in the chronic form, accumulation of secretion in the inferior nares, especially at night, when it drops down the throat, waking the patient up coughing and choking. This remedy must be used for weeks, and even months, at intervals, in the chronic form. The 3d, 4th or 6th trit (1x10) is the best; three to four times a day.

Eucalyptus Glob.—This is one of the foremost and most useful agents in chronic catarrh. It has been, and I think, still is, rather neglected as such by many physicians. Since there is no proving of it, its indications are clinical only. Still, the manifest favorable clinical results we repeatedly had with it give it a good name and a prominent place in this particular disease. It has to be used persistently for months—and repeated between intervals—if there should be another remedy indicated for the time being. We must never lose sight of it in a chronic case. We use mostly the 2d and 3d dilution internally, and in some cases the tincture locally at the same time. Dose, from three to four or five times a day, 10 drops in half a glass of water, of which solution a tablespoonful is to be taken.

Symptoms.—Profuse discharge from the nose, mostly watery or milky discharges, soreness of the nose, irritative heat through the nasal passages and throat; takes cold very easily (like sulph.); great languor and weakness in the morning, heat and restlessness at night; *talks through the nose*. These symptoms have been verified in clinical cases. It seems to be more adapted for chronic and nasal catarrh than any other form.

Causticum.—Coryza with hoarseness; the catarrh is more generally in the throat and larynx, accompanied with difficulty in speaking (*catarrhal aphonia*), especially in singers, and pale, yellow-faced clerks.

Hoarseness is always present when *causticum* is indicated. The patient has a yellow complexion, is melancholy, and looks at the dark side of everything.

Carbo Veg.—This is another very important remedy in catarrhal aphonia—great hoarseness and changeable voice. We cured with it a lady, middle-aged, that could not talk over a whisper for two years. Given at intervals for two months; used first the 3d trit; subsequently, the 2d.

Other characteristic symptoms are general debility, swelling and weakness of glands, profuse foul salivary discharges; food of most any kind disagrees; catarrhal dyspepsia, with great aversion to food and weakness of stomach; gastric region feels caved in.

Aurum Met.—Aurum is especially the remedy when the nasal bone is affected; deep-seated ulceration in the nasal bone and the frontal sinuses. When the seat of disease is in these parts, and the discharge has a bad odor. In chronic *Ozæna* Aurum takes the lead. There is, also, present great melancholy; the patient is apt to think of self-destruction; great loathing of life; *Otorrhæa*, and even caries of the nasal and palatine bones, or of the mastoid, or the ossicular bones. This is the most important remedy where *Calc.* has exhausted its use; in children, where the ears suppurate, and the sequelæ of *Scarlatina* have wrought such destructive havoc; where the bones are affected with a badly smelling discharge. In all such cases, as well as in syphilitic ulceration of the same nature, Aurum is a god-send.

Merc. Sol.—This remedy is most important in similar cases as Aurum, but more particularly in syphilitic catarrhal affections; when the bones, especially the long bones, and the skin are affected, ulcers on the surface of the bones; chronic sore throat, with ulcers; nasal catarrh, with ulcers; bad effects from malaria and glandular swellings.

Silicea.—Is very often useful in chronic as well as in acute cases of catarrh or catarrhal fever. There may be a painful dryness of the nose, with pimples; acrid discharge; the right side being more affected. The discharge is corrosive, and forms large crusts in the nose, which may cause the nose to bleed when they come away. There is a tendency to lymphatic swellings, with suppuration, and adapted mostly to chronic, scrofulous, suppurative diseases, especially to rachitic children, with poor nutrition.

Sulphur.—The patient takes cold from the least exposure, and cannot bear the least draught of air; very often repeated colds. Has very sensitive mucous membranes of the nose, bronchi, and larynx; bloody discharges; coryza, with stopped-up nose; nose inflamed at the tip; stoppage worse on the left side.

Herpetic eruption on the external nose, at the tip and in the *alæ nasi*; hot feeling on top of the head, with great thirst, and hungry only at about 11 A. M.; feels very weak and faint.

Sulphur may be a good remedy to commence the treatment of a chronic case—in particular, such cases that have been going through all kinds of experimental treatment—having used a lot of useless drugs. There are many other agents under the law of *similia* that may be used advantageously in catarrh, of which we will speak at some future time.

Homœopathy Practically Illustrated—Model Cures.

For this department we desire reports of cases treated homœopathically. In order to be really useful, it is essential that but one remedy be given at a time, and that the symptoms which decided the choice of the remedy be clearly defined. The question of dose being an open one, we shall welcome all cases, whether treated with high or low potencies. We take pleasure in giving at full length one of Hahnemann's well known cases, as being an excellent model, and illustrating the homœopathic method by the master himself. Though familiar to many of our readers, it will always bear renewed study. We hope our professional brethren on the coast will make this department a mirror of their daily doings. In the absence of new cases, we shall draw upon the classical ones as recorded throughout the homœopathic literature.

Sch—, a washerwoman, somewhat above forty years old, had been more than three week unable to pursue her avocations, when she consulted me.

1. On any movement, especially at every step, and worst on making a false step, she has a shoot in the scrobiculus cordis, that comes, as she avers, every time from the left side.

2. When she lies she feels quite well, then she has no pain anywhere, neither in the side nor in the scrobiculus.

3. She cannot sleep after three o'clock in the morning.

4. She relishes her food, but when she has ate a little she feels sick.

5. Then the water collects in her mouth and runs out of it, like the water-brash.

6. She has frequently empty eructations after every meal.

7. Her temper is passionate, disposed to anger. Whenever the pain is severe she is covered with perspiration. The catamenia were quite regular a fortnight since.

In other respects her health is good.

Now, as regards symptom 1, *belladonna*, *china* and *rhus toxicodendron* cause shootings in the scrobiculus, but none of them only on motion, as is the case here. *Pulsatilla* certainly causes shootings in the scrobiculus on making a false step, but only as a rare alternating action, and has neither the same digestive derangements as occur here at 4, compared with 5 and 6, nor the same state of the disposition.

Bryonia alone has among its chief alternating actions, as the whole list of its symptoms demonstrates, pains from movement, and especially shooting pains, as also stitches beneath the sternum (in the scrobiculus) on raising the arm, and on making a false step it occasions shooting in other parts.

The negative symptom 2, met with here, answers especially to *bryonia*; few medicines (with the exception, perhaps, of *nux vomica* and *rhus toxicodendron* in their altering action—neither of which, however, are suitable for the other symptoms) show a complete relief to pains during rest, and when lying; *bryonia* does, however, in an especial manner.

Symptom 3 is met with in several medicines, and, also, in *bryonia*.

Symptom 4 is, certainly, as far as regards "sickness after eating," met with in several other medicines, (*ignatia*, *nux vomica*, *mercurius*, *ferrum*, *belladonna*, *pulsatilla cantharis*), but neither so constantly and usually, nor with relish for food, as in *bryonia*.

As regard symptom 5, several medicines certainly cause a flow of saliva like water-brash, just as well as *bryonia* the others, however, do not produce the remaining symptoms in a very similar manner. Hence *bryonia* is to be preferred to them in this point.

Empty eructation (of wind only) after eating is found in few medicines, and in none so constantly, so usually, and to such a great degree, as in *bryonia*.

To 7.—One of the chief symptoms in diseases (see *Organon of Medicine*, § 213) is the "state of the disposition," and as *bryonia* causes this symptom also, in an exactly similar manner—*bryonia* is for all these reasons to be preferred in this case to all other medicines as the homœopathic remedy.

Now, as this woman was very robust, and the force of the disease must accordingly have been very considerable to prevent her, by its pain, from doing any work, and as her vital forces, as has been observed, were not consensually affected, I gave her one of the strongest homœopathic doses, a full drop of the pure juice of *bryonica* root,* to be taken immediately, and bade her come to me in forty-eight hours. I told friend E., who was present, that within that time the woman would be quite cured, but he, being but half a convert to homœopathy, expressed his doubts about it. Two days afterwards he came again to ascertain the result, but the woman did not return then, and, in fact, never came back again. I could only allay the impatience of my friend by telling him her name, and that of the village where she lived, about three miles off, and advising him to seek her out, and ascertain for himself how she was. This he did, and her answer was: "What was the use of my going back? The very next day I was quite well, and could again commence my washing, and the day following I was as well as I am still. I am extremely obliged to the doctor, but the like of us have no time to leave off our work; and for three weeks previously my illness prevented me earning anything."—*Samuel Hahnemann*.

Asterias in Acne.—Numerous small puncta with black points and small red basis. (*Kal. bich.*, more extensive inflammation, and more like little boils.)

Ammon. Caust.—Joints stiff and enlarged by calcareous matter. (Also *Guaicum*, *Causticum*, *Graphit*, *Thuja* and *Sepia* (smaller joints).)

EDITORIAL DEPARTMENT.

THE CALIFORNIA HOMOEOPATH is published with a view to facilitate communication between all who are interested in Homœopathy and its development on the Pacific Coast. The publishers will furnish a bi-monthly sheet containing original articles by the physicians of this coast on such subjects as will advance the acceptance of Homœopathy as a system of medical faith and practice among the people. The editor will supply, besides, extracts of the best that homœopathic literature has to offer, and give such news relative to our local interests as will make the paper the exponent of the homœopathic life on this coast. For this purpose, we shall be glad to receive from homœopathic hospitals and dispensaries, and from the profession generally, all reports of their doings, together with such papers as may have been read at their meetings. On the one hand, it is thus designed to furnish a medium of communication between homœopathic physicians and the rapidly extending circle of intelligent and inquiring laymen; and on the other hand, we wish to make this paper a centre for the homœopathic profession—a centre, at least, until such time when a worthier one can be supported. There are distinctive uses to be performed by the Homœopaths on this coast. But our isolation and remoteness from the great centres of medical thought bring with them great difficulties. We are more dependent on ourselves, hence the greater need of organization and friendly co-operation in carrying out the work before us. Our field is really unlimited, and we have an intelligent and sympathetic community to give us hearty support in all really genuine work for the cause. All we need is *esprit de corps* and perseverance. It seems to us that the establishing a journal as the exponent of our distinctive position is one of the best means and most important to bring us recognition, and aid in the realization of our aims.

What, then, are the principles that guide us in our faith and practice, and for which we ask the support of the profession? They are the essential doctrines of Hahnemann, and foremost the law of similia and the single remedy. However great the gains medical science has achieved through the cultivation of pathology, morbid anatomy, etc., we hold that a true science of therapeutics cannot be built on these foundations alone. This is only possible by the cultivation of pharmacology according to the method of Hahnemann. Only by studying the drug effects on the comparatively healthy human organism, and noting the relation these bear to diseased states, as expressed by the totality of symptoms—subjective and objective. The relation has been found invariably to be one of similars, and the basis for a true science of therapeutics thus laid. We do not hold these principles, nor do we advocate them, in the spirit of blind faith in authority—Hahnemann's, or that of any other master in medicine. We dread a literal, dogmatic construction of the words of a teacher to the neglect of the spirit of his teachings, knowing that this alone gives life. We recognize in Hahnemann's, essential doctrines, general truths, based upon laws of nature, adherence to which opens the mind to the reception of light to guide it to a right comprehension of the duty and needs in every case of sickness, and experience at the bedside for seventy-five years by thousands of careful and trained observers, prove beyond all question, their adaptability and practical nature.

The semi-annual meeting of the California State Society of Homœopathic Practitioners took place on Wednesday evening at San Francisco, President Selfridge in the chair. After reading the minutes of the last meeting the reports of the various bureaus were received. Dr. G. M. Pease read a lengthy but interesting paper on "Gynecological Experiences," being mainly a very good resumé of the pathology and treatment of Metritis and Ovarian Tumors, illustrated by numerous cases from the doctor's practice. A motion was made by Dr. Munson to have the paper published. This caused animated discussion. Dr. Pyburn, of Sacramento, earnestly opposing it, since, in his opinion, the paper though an interesting resumé, contained nothing new or original. Dr. Palmer was willing to see it published at the society's expense, provided there was merit in it, and others were willing enough to see it printed at Dr. Pease's own responsibility. It was at last voted that permission should be given to Dr. P. to print

his paper. Several other interesting papers were also read—by Dr. Tucker, of Oakland on Urethral Stricture, and by Dr. Moliere on Electricity. Dr. Raymond presented a list of remedies with indications acting on the os coccyx, which paper unfortunately, was not read, and thus the society lost the benefit of an undoubtedly valuable study, and unless it will be given to us for publication it will be buried and lost in the archives of the State Society. Dr. French gave a verbal report of the doings of the Ophthalmological branch of the profession, showing the high and advanced standard of our Ophthalmic College, and spoke enthusiastically of the great superiority of Homœopathy over old school medication in the treatment of eye and ear diseases. The doctor has been an old school practitioner and knows whereof he speaks, and expressed his earnest belief that the Law of Similia was nothing less than a divine law. A communication from the American Institute of Homœopathy was received and read by Dr. Pease, urging the society to take a part in the effort now being made to have a law passed by Congress to do away with discrimination against Homœopaths in the appointment of military and naval surgeons. Dr. Davis spoke in a very spirited and feeling manner on the subject. The chair appointed a committee for the purpose, composed of Dr. Davis, Dr. French and Dr. Currier.

A resolution was presented and will be acted on at the next meeting abolishing the *semi-annual* meeting of the society. We regret the necessity for this change, and yet it seems advisable, since the reports of the various bureaus are meager enough at the annual meeting. We think it a mistake to have so great an array of bureaus whose only use seems to be to give the chairman unnecessary labor in filling with appointments that seldom report. It is pretentious and farcical in us to yearly appoint committees on Anatomy, Physiology, Histology, Climatology, Psychology, Chemistry, etc., when there is no report ever made, and even if made would not add anything new or original, since these branches are pursued with wonderful assiduity by the old school, and their results could be incorporated, if desirable and useful, by the various committees on Materia Medica, Clinical Medicine, Pathology, etc.

Let us concentrate our efforts on work that we *can* do well, that we are all interested in, in the pursuit of which depends the growth and development of Homœopathy, for it is only we, the believers in the law of similia, that can work up our Homœopathic Materia Medica, and verify it by clinical observation. There is a peculiar field, too, in the development of our Materia Medica, that devolves upon us, the physicians of this coast; and this is, the systematic provings of our valuable indigenous plants. Let us have an organized committee on provings, and take up systematically our own remedies, that are waiting to be made into willing servants for the cure of disease. It is in this direction, only—that is, in the *direction of developing the Homœopathic Materia Medica* as the centre of our professional activity, that we can maintain our *raison d'être* and do our legitimate share in establishing the universal rule of the law of similia for the cure of disease.

The *Hahnemannian Monthly* comes laden every month with valuable practical matter. The genial editor himself supplies the studies in Materia Medica, which alone make the journal indispensable. Then the proceedings of the Philadelphia County Society, together with the papers read, are eminently useful. Since the work has been divided among the various bureaus much more practical results have been produced. In the August number is a valuable compilation of Remedies acting on the Dorsal Region, by Dr. F. F. Laird, whose knowledge of Materia Medica we know to be phenomenal. Both the August and September numbers contain articles on the use of *arctium lappa* for prolapsus uteri, which we had an opportunity to verify. This reminds us of an observation of Dr. Reiter, an allopath, recently published, who uses the lappa for *Psoriasis* and atonic dyspepsia.

The *Clinique* for September contains an interesting lecture by Dr. Leavitt on the Presentation and Position of the Foetus, with their diagnosis. We learn from it that the Professor teaches his students to practice diagnosis externally by palpation and auscultation. This is most valuable, and in many cases

sufficient to determine the position. In European clinics no student is allowed to make an internal examination until he has satisfied himself by external examination and made his diagnosis thereby. A little practice will soon enable one to elicit valuable information concerning both the presentation and position of the foetus. "Examination ought first to be made with reference to the direction of the long uterine axis. If that corresponds pretty closely to the longitudinal axis of the woman's body, the presentation must be either cephalic or pelvic. By spreading the hands over the uterus, a greater sense of resistance and fullness can generally be felt, more to one side or the other, which represents the situation of the foetal back. Now, by deep palpation, with a single hand on the hypogastrium, the head of the foetus, if presenting, can be felt and recognized by its form and hardness."

Dr. LANSING makes a report of a recent epidemic of Whooping Cough. The remedies were ipecac, belladonna, cuprum, corallium, drosera, phosphor—all remedies corresponding to violent spasmodic action, which was characteristic of most cases.

Dr. Burt used naphthalin, especially for the spasmodic cough, without vomiting.

Dr. Small placed most reliance on corallium. (Last spring in San Francisco we found corall. 30 to modify nearly every case.)

Dr. Holman used *Ambrosia*, especially when accompanied by *epistaxis*.

Dr. Hart reports a wonderful cure of idiocy by—*mirabile dictu*—one dose of sulphur, 80 m.

The *Homœopathic Journal of Obstetrics* is an ornament to our school. The new volume (IV.) beginning with the August number opens with a paper presented to the American Institute by Dr. Minton, on "Remarks on Uterine Diseases." We propose to give our readers the full benefit of this valuable contribution, and shall publish it in successive numbers. The present number contains besides a valuable abstract of the proceedings of the American Institute as far as they come within the province of that journal. Subscription price is \$4 per year.

Desirable locations for Homœopathic physicians will be given as we are notified, and for this purpose we should like to receive the names of all towns containing as yet no representative of our school. In order to make this feature practically useful, it is desirable to know the number of inhabitants, and address of such parties as are specially interested in Homœopathy.

It is our aim to furnish a missionary for the cause of Homœopathy, and therefore we shall be glad to be favored with the address of every one interested in this movement, and send them the paper for examination and distribution among their friends.

In a future number we will publish a directory of Homœopathic Physicians on the Pacific Coast, and we invite all practitioners of Homœopathy to aid us in giving their correct address.

CLINICAL EXPERIENCES.

By H. N. GUERNSEY M.D.

Abies Nigra.—A few symptoms or groups of symptoms are very characteristic of this remedy, and equally reliable when they stand out distinctly as such—viz: Total loss of appetite in the morning, but great craving for food at noon and at night; sensation of an undigested, hard-boiled egg in the stomach; continual distressing constriction just above the pit of the stomach, as if everything were knotted up, or as if a hard lump of undigested food remained there; a painful sensation, as if something were lodged in the chest, and had to be coughed up. No amount of coughing is able to dislodge the painful object; the cough rather increases the suffering; water-brash often succeeds the cough, and often quantities of mucus are expectorated, but the offending object remains, causing much distress and profuse lachrymation. The trouble is really in the stomach, and after a while subsides, to reappear the next day or night, and so it continues for years, until *abies nig.* comes to the rescue.

Either of the above groups of symptoms, when well marked, may become suggestive of a remedy that will work a wonderful cure that nothing else can. When these stomach symptoms are the most characteristic in a given case, two or three doses of *abies*, not lower than the 30th potency, given twelve hours apart, will be sufficient to remove not only these symptoms, but a host of others, if they exist, such as dysuria, constipation, old chronic coughs, headaches, etc., by waiting patiently on these three doses from five to eight weeks. Let the doubtful members of our profession try this method faithfully if they wish to know for themselves. *Abies* should not be repeated oftener than once per week or two, and not then if improvement still continues, for it is a very powerful and long-acting remedy. The idea to be distinctly perceived in this matter is not a sensation of weight, but a lump, as of a hard-boiled egg, or a three-cornered substance—something that hurts.

Acetic Acid.—When the three symptoms, viz, intense and constant thirst, passing large quantities of pale urine day and night, and marked debility, all stand in a group in a given case, we may be very sure this remedy will be of priceless value in restoring such a case to health.

In **diabetes**, no remedy equals this when presenting the above as most characteristic symptoms. In a few days the diminution of thirst shows a marked improvement. The urine decreases in quantity; chemical analysis shows a decrease of sugar; the strength and weight of the patient increase, and finally perfect health is restored.

Also, in **dropsy**, where the abdomen and legs are badly swollen, and the above three symptoms are the most characteristic.

In diarrhoea of children, old chronic cases with bloated abdomen, œdema of lower extremities, undigested stools, with the above characteristics.

In **myetitis**, characterized as above, particularly if the patient must lie on abdomen to find relief of pain in back.

In **constipation** with the above characteristics.

In **cancer of stomach** with much distress, burning nausea, vomiting, etc., and these characteristics.

In all my experience with this remedy, which has been large, I have never used it below the thirtieth potency, and have not given more than three doses, twelve hours apart before waiting a few days to see the effect, and have often waited two and three weeks without repeating it, so satisfactory has been its action. I make it an invariable rule never to repeat the dose so long as I can perceive the least improvement. In this way I make many cures with this invaluable remedy that could not be made in any other way. What I have written above in regard to the uses of this remedy I am responsible for only when used in accordance with our law of cure. For the fullest symptomatology extant of this remedy, see Hering's Guiding Symptoms."

Treatment of Carbuncles.

Dr. Stropp, of Berlin, claims brilliant results for his treatment of carbuncles, which consists in applying a compress with a three per cent. solution of carbolic acid, and over this a bandage—rubber or ordinary. According to the degree of painfulness, the wet compress is renewed every one to three hours. Applied early, the doctor has prevented suppuration, and pain soon ceases. With the use of this method, Dr. S. has discarded the use of the knife.

Dr. Lyons, of Oakland, informed us that he had favorable results with injecting a solution of carbolic acid, similar to the treatment for piles. We recently obtained a very satisfactory and speedy cure with the internal use of Anthracin 200 (see *Raue Pathology*), followed by Hepar 3x. No knife.

Dr. Sulzer, of Berlin, uses *Apis* 3, with *Silicea* to aid the healing process.

Theridion.—Headache of worst kind, with nausea and vomiting, shaking chills. Symptoms all worse from noise and motion. Feeling as if vertex did not belong to her; felt separated, as if it could be lifted off.

Eugenia.—Pimples in face which are painful; worse during the menstrual period.

build up Homœopathy on this coast, and thus benefit the profession and public while building up a trade for itself. With the statement of this policy, we respectfully solicit the patronage of the profession and public, and assure them that we can and will give entire satisfaction.

Our friend, Dr. Cook, left for Los Angeles. The doctor having chartered a car for carrying his professional and domestic paraphernalia into his new location, evidently means to make Southern California his permanent home. Our best wishes go with him. He is a true missionary of our school, and the city is to be congratulated where he will stay and labor for the cause.

Dr. Ely left San Francisco and settled in St. Helena.

Dr. R. B. Johnson, lately from Illinois, has taken up a permanent residence at East Oakland, where he has purchased a home. We welcome him most heartily, and predict for him a successful practice.

Dr. E. S. Breyfogle, well and favorably known, has come from San Jose to make our city his permanent home, and has our best wishes for success. Dr. B. Clow takes his place at San Jose.

Dr. B. P. Wall is doing good work in representing our school and practising his profession at Berkeley. The Doctor promises to interest himself in the HOMŒOPATH, and we congratulate our readers accordingly.

It is now over twelve years since Boericke and Tafel first opened their Branch Homœopathic Pharmacy on this coast. Then the venture seemed doubtful enough, judging from the state of Homœopathy then existing. In San Francisco there were only about ten physicians belonging to the new school, and scarcely twenty more throughout the coast. The more need, however, for a good pharmacy, a center of Homœopathy from which could emanate books, journals and pamphlets, and whose mission it was to supply reliable medicines to all desiring to give the new method a trial. The importance of the movement became soon apparent, and with the popularisation of the system came an increase in the number of its adherents, and a demand for more physicians representing the new school. So, to-day we number in San Francisco alone, fifty Homœopathic physicians, and there is scarcely a town of any importance that has not its representative. The Homœopathic Pharmacy itself, largely instrumental in this beneficent change, has grown in importance and extent with the rest of the school. From a modest branch of a large Eastern house, it has developed into an independent concern, fully equipped in every department under the management and control of trained and skilled professional men. The new firm has taken possession but six months, but already the desirable changes are apparent. Numerous are the complimentary notices received from physicians and laymen, bearing testimony to the promptness, neatness and exactness with which their orders have been filled. It is the policy of the new firm to furnish the profession and homœopathic public on the Pacific Coast *the best* in every branch of homœopathic pharmacy, to keep up the high standard of purity and excellence always characteristic of Boericke & Tafel's preparations, and to furnish them at the lowest possible figures for which they can be furnished on this coast. Henceforth it will not be to the interest of any physician to send East for his supplies, for prices are as cheap as those of any Eastern first-class house. It is the earnest endeavor of the new firm to do everything legitimate in order to

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The author, already favorably known by his little work on Catarrh, presents us with the most exhaustive work on Consumption in the homœopathic school. Since the admirable compilation of Burts', we had no work giving in full the homœopathic therapeutics of consumption. This is fully carried out in the present work—the author paying special attention to the indication of the remedies, giving their leading symptoms, both local and general, as far as they refer to the treatment of the disease in hand, with their modalities and each picture of a remedy illustrated by clinical cases, making it most practical for the student and practitioner. He has endeavored to present in a succinct manner the salient points advanced by each of the leading pathologists, and we think he has succeeded in this. We believe this work to be a valuable contribution to our literature, and wish it a large sale, as it really merits.

This little treatise by these eminent men is a masterly contribution to our literature. The division of labor in this case has been fruitful of good results, without impairing the harmony of the whole work. In it, Professor Thomas ably describes the anatomy and physiology of the Pancreas; Professor Morgan with rare tact presents a digest of all that is really known of the etiology and special pathology of the singular diseases of the Pancreas, and their relation to those of other adjacent organs; Professor Korn-dorfer gives their differential diagnosis, while Professor Farrington gives indications for the homœopathic remedies that may be needed in the treatment. We believe this is the first work on diseases of the Pancreas, and it is no small honor that it hails from the homœopathic school. It will serve as a useful guide, and at the same time as a nucleus for the observations of the profession.

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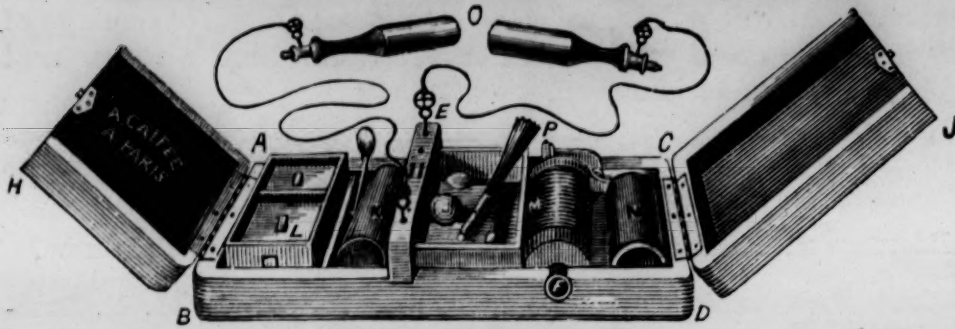
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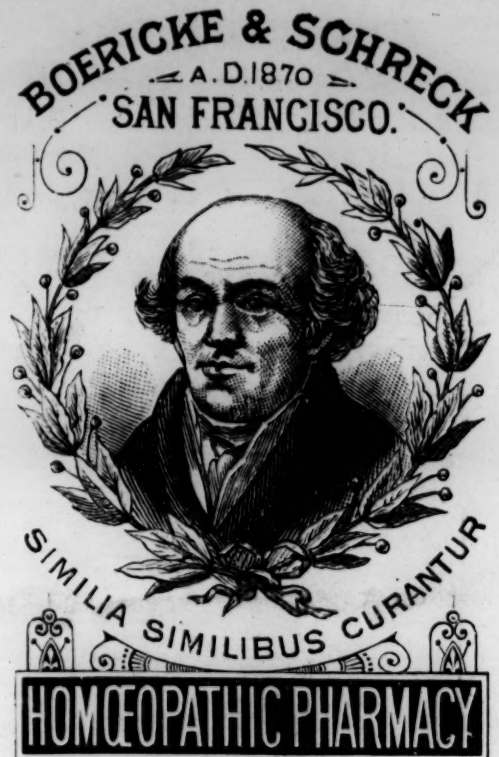
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